

091600594

## ISSUE SLIP STAPLE AREA (for additional cross references)

8/3/00

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			6
<b>FORMALITY REVIEW</b>			7-24-00
<b>RESPONSE FORMALITY REVIEW</b>	DS		9-15-00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 - ..... Restricted O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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